FORM

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



33060

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
ORM LIMITED OFFERING EXEMPTION

		
Prefor		Serial
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Name of Offering (check if this is an	amendment and name has changed and	d indicate change)			
Ohio Kentucky Oil Corporation/Saline					
Filing Under (Check box(es) that apply): Type of Filing: New Filing An	Rule 504 Rule 505 Rule	e 506 Section 4(6)	ULOE		
	A. BASIC IDENTIFIC	ATION DATA			
1. Enter the information requested about	the issuer				
Name of Issuer (check if this is an am	endment and name has changed, and in	idicate change.)			
Ohio Kentucky Oil Corporation/Saline	Valley Project #1 Joint Venture				
Address of Executive Offices	(Number and Street, O	City, State, Zip Code)	Telephone Number (I	ncluding Area Code)	
5112 Portage St. N. W. North Canton, OH 44720 330-494-8810					
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street,	City, State, Zip Code)	Telephone Number (Including Area Code)	
Brief Description of Business			· · · · · · · · · · · · · · · · · · ·	, /	
The Development of Oil & Gas Prope	ties			PROCESSE	
Type of Business Organization corporation business trust	limited partnership, already formed limited partnership, to be formed		please specify): ht-Venture	JUN 2 2 2005	
Actual or Estimated Date of Incorporation of Jurisdiction of Incorporation or Organization	بالين بعلي			THOMSON FINANCIAL	
GENERAL INSTRUCTIONS			· · · · · · · · · · · · · · · · · · ·		

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer Director Promoter Beneficial Owner General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Spaulding, Johnnie Y. Business or Residence Address (Number and Street, City, State, Zip Code) N. Canton, OH 44720 5112 Portage St. N. W. General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Campbell, Carol L. Business or Residence Address (Number and Street, City, State, Zip Code) N. Canton, OH 44720 5112 Portage St., N.W. Beneficial Owner Promoter Executive Officer General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director П Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter \Box Director Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. 17	NFORMAT	ION ABOU	T OFFERI	NG				
I. Has	he issuer sol	d, or does th									Yes	No De
	Answer also in Appendix, Column 2, if filing under DLOE. What is the minimum investment that will be accepted from any individual?										. 20	562.50
2. Wha	t is the minin	num investo	nent that w	ill he acre	pted from s	any individ	lual?	**********	*************		<u> </u>	
3. Does	the offering	permit join	t ownershi	p of a sing	le unit?					•••••	Yes x	No
comi If a p or sta	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											
	e (Last name mission Will		ividual)									
	or Residence		lumber and	d Street, C	ity, State, Z	Lip Code)						
Name of	Associated B	roker or De	aler									
States in	Which Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Che	ск "All State	es" or check	individua	States)							☐ Ai	i States
AL IL MT RI	IN NE	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Nam	e (Last name	first, if ind	ividual)		,							
Business	or Residenc	e Address (l	Number an	id Street, C	City, State,	Zip Code)						
Name of	Associated B	roker or De	aler									
	Which Perso											
(Che	ck "All State	s" or check	individual	l States)							Al	i States
IL MT RI	NE	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Nam	e (Last name	first, if ind	ividual)				-			·		
Business	or Residenc	e Address (1	Number an	id Street, C	City, State,	Zip Code)						· . - · · · · · · · · · · · · · · · · · ·
Name of	Associated B	roker or De	aler								-·· · · · · · · · · · · · · · · · · · ·	
States in	Which Perso	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	ck "All State										□ Al	l States
AL IL MT	NE NE	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter, "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity 32 Joint Venture Units @ \$41,125.00 ea.	\$_1,316,000.00	\$ 534,625.00
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	s	\$
	Other (Specify)		
	Total	<u>\$ 1,316,000.00</u>	\$ 534,625.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	18	\$ 534,625.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	18	\$ _534,625.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		<u>\$ 1,000.00</u>
	Legal Fees		s
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Blue Sky Fees and Expenses		\$ 3,000.00
	Total	_	\$ 4,000.00
		2	

E. STATE SIGNATURE

1.	Is any party described in 17 CFR 230,262 presently subject to any of the disqualification	Yes	No
	provisions of such rule?		X

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

	\wedge	
Issuer (Print or Type)	Signature ///	Date
Ohio Kentucky Oil Corporation/Saline Valley Project	I I WAVI ILA	6/6/05
Name (Print or Type)	Title (Print or Type)	
Carol L. Campbell	Carol L. Campbell, Pres. of Ohio Kentucky O	il Corp., the Corporate General Ptr.

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

L	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$1,312,000.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees]\$	S
	Purchase of real estate] s	s
	Purchase, rental or leasing and installation of machinery and equipment		s
	Construction or leasing of plant buildings and facilities	s	s
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	¬s	□\$
	Repayment of indebtedness		
	Working capital		
	Other (specify): (Turnkey Drilling, Testing, and Development Costs)	\$ 1,312,000.0	x 🗆 s
]\$	
	Column Totals	\$ 1,312,000.0	0 <u>s</u> 0.00
	Total Payments Listed (column totals added)	≥ \$ <u>1,</u>	312,000.00
	D. FEDERAL SIGNATURE		
sigi	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice tature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	sion, upon writte	
Issı	ner (Print or Type) Signature 1/1)ate	
Or	io Kentucky Oil Corporation/Saline Valley Project	6/6/05	
	ne of Signer (Print or Type) Title of Signer (Print or Type)	0 " 0	
—	rol L. Campbell, Pres. of Ohio Kentucky Oil	Corp., the Corp	orate General Ptr.
	` /		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

APPENDIX											
1	Intend to non-a investor	2 I to sell accredited s in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		under State ULOE (if you, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Joint- Venture unit \$41,125. ea.	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK											
AZ											
AR											
CA		×	\$41,125.00	5	\$185,062.50	0	\$0.00		×		
СО											
СТ											
DE											
DC											
FL		×	41,125.00	4	\$123,375.00	0	\$0.00		×		
GA		×	41,125.00	1	\$20,562.50	0	\$0.00		X		
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IA											
KS											
KY											
LA											
ME											
MD											
MA											
МІ											
MN						-	,-,-,-				
MS								<u> </u>			

				APP	ENDIX			·	
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				ification ate ULOE attach ation of granted)
State	Yes	No	Joint- Venture unit \$41,125. ea	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО	a delimentary of the second								
MT									
NE									
NV									
NH									
ŊJ									
NM									
NY		×	41,125.00	2	\$41,125.00	0	\$0.00		X
NC		×	41,125.00	1	\$20,562.50	0	\$0.00		×
ND									
ОН			.						
ОК									
OR									
PA									
RI									
SC		×	41,125.00	1	\$20,562.50	0	\$0.00		×
SD									
TN									
TX		×	41,125.00	3	\$82,250.00	0	\$0.00		×
UT									
VT									
VA		×	41,125.00	2	\$41,125.00	0	\$0.00		x
WA							,		
wv		31							
wı									
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